											application or Docket Number					
	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001															
CLAIMS AS FILED - PART I										SMALL E	NTITY		OTHER THAN			
(Column 1) (Column 2)										SMALL ENTITY TYPE				ENTITY		
T	OTAL CLAIMS	3		•						RATE	FEE	7	RATE	FEE		
F	OR .		-		NUMBER	RFILED	NUMBER EXTRA			BASIC FEE 370.00			BASIC FEE	740.00		
TO	OTAL CHARGE	ABLE	CL	AIMS	m	inus 20=	*			X\$ 9=		OR	X\$18=			
INI	DEPENDENT C	LAIM	S		, п	ninus 3 =	*			X42=			X84=			
MULTIPLE DEPENDENT CLAIM PRESENT										+140=		OR	+280=			
* 1	* If th difference in column 1 is less than zero, enter *0" in column 2									TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II													OTHER	THAN		
	-			nn 1)	(Column 2) (Column 3					SMALL	ENTITY	OR	SMALL	ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NING ER		HIGHES NUMBE PREVIOU PAID FO		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total	*	<u> [</u>	7	Minus	** 2	10	=		X\$ 9=		OR	X\$18=			
AME	Independent	*	1	105.14	Minus	***	3	= -	- [X42=		OR	X84=			
	FIRST PRESE		ATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=			
•	BEST AVAILABLE COPY (Column 1) (Column 2) (Column 3)								L	TOTAL	- ; -	γ ₂ ,	TOTAL ADDIT. FEE	+		
									ADDIT. FEE				ADDIT FEE			
NT B		RE	AFT	NING		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	*	6)_	Minus	**	N	=	1	X\$ 9=		OR	X\$18=			
4ME	Independent	* '			Minus	***	3		┝┋	X42=		OR	X84=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+140=		OR	+280=			
									Αſ	TOTAL DDIT. FEE		OR ,	TOTAL NDDIT: FEE			
				n 1) ·		(Colum		(Column 2)								
WEN		REI	FTE	IING		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
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	Independent	*	Ī		Minus	*** 3			十	X42=		t	X84	\Rightarrow		
1	FIRST PRESE	NTATI	ON	OF MU	ILTIPLE DEF	PENDENT	CLAIM		-			27				
* 16	the entry in colum	nn tie	ممما	than th	e entry in solu	mn 2 write '	'0" in oot	ıma 3	L	+140=		OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."																
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.																
PM:	PTO-975 (Poy 8/0	4.							Dates	(T ()			DIMENT OF			

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

5649-920

CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			00	OTHER THAN SMALL ENTITY	
1	·	- <i>i</i>	(Column	<u>1) , </u>	(Colu	nn 2)	L.			OR		
TO	TÁL CLAIMS	;	18				L	RATE	FEE		RATE	FEE
FOI	A		NUMBER (ILED	NUMBI	ER EXTRA	B	BASIC FEE	370.00	OR	BASIC FEE	740.00
то	TAL CHARGEA	BLE CLAIMS	H minus 20= *			0		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS 2 minus 3 = * O								X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	140
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	OTHER SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE _.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
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建物	SANCTON CONTRACTOR OF THE PROPERTY OF THE PROP									OR	+280=	
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AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER NOUSLY DFOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL
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Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=	· · · · · · · · · · · · · · · · · · ·	OR	+280=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
	٠ - سير	(Caluma 1)		(Calı	ımn 2)	(Column 3)	^	DDN, FEE		•	ADDII. I CC	
_		(Column 1) CLAIMS	1		HEST	Columnia	1 -		4001			ADDI-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
W Q	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<u> </u>			
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**	If the "Highest Nu	ımn 1 is less than t ımber Previously P	aid For" IN TH	IS SPACE	is less that	an 20, enter "20	·" A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												